

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Mukund : Art Unit: 3629  
Serial No.: 09/682,713 : Examiner: Jonathon P. Ouellette  
Filed: October 9, 2001 :  
For: WEB BASED METHODS AND :  
SYSTEMS FOR MANAGING :  
COMPLIANCE ASSURANCE :  
INFORMATION :

**Mail Stop: RCE**  
**Commissioner for Patents**  
**P.O. Box 1450**  
**Alexandria, VA 22313-1450**

**TRANSMITTAL**

1. Transmitted herewith is:  
Transmittal (3 pages)  
Amendment in response to Office Action dated September 5, 2008 (25 pages)
2. Applicant  claims small entity status.  
 is other than a small entity.

**EXTENSION OF TERM**

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

(complete (a) or (b), as applicable)

- (a)  Applicant petitions for an extension of time under 37 C.F.R. 1.136  
(Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)

Extension for response within:	Other than small entity Fee	Small entity Fee (if applicable)
<input type="checkbox"/> first month	\$ 130.00	\$ 65.00
<input type="checkbox"/> second month	\$ 490.00	\$ 245.00
<input checked="" type="checkbox"/> third month	\$ 1,110.00	\$ 555.00
<input type="checkbox"/> fourth month	\$ 1,730.00	\$ 865.00
<input type="checkbox"/> fifth month	\$ 2,350.00	\$1,175.00
	Fee Due	<u>\$ 1,110.00</u>

If an additional extension of time is required, please consider this a petition therefor.

*(Check and complete the next item, if applicable)*

- An extension of \_\_\_\_\_ months has already been secured. The fee paid therefor \$\_\_\_\_\_ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$

**OR**

- (b)  Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

**FEE FOR CLAIMS**

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

(Col. 1) CLAIMS REMAINING AFTER AMENDMENT	(Col. 2) HIGHEST NO. PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA	SMALL ENTITY		OTHER THAN SMALL ENTITY ADDITIONAL RATE FEE
			=	x \$26.00 = \$	
TOTAL INDEP.	MINUS		=	x \$26.00 = \$	x \$52.00 = \$
	MINUS		=	x \$110.00 = \$	x \$220.00 = \$
	FIRST PRESENTATION OF MULTIPLE DEP. CLAIM			+ \$195.00 = \$	+ \$390.00 = \$
				TOTAL ADDITIONAL FEE \$	OR
					TOTAL ADDITIONAL FEE \$

(a)  No additional fee for Claims is required

**OR**

(b)  Total additional fee for claims required \$

**FEE PAYMENT**

5. Attached is a check in the sum of \$\_\_\_\_\_

Charge Deposit Account No. 01-2384 the sum of \$ 1,110.00  
A duplicate of this transmittal is attached.

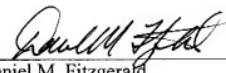
**FEE DEFICIENCY**

6.  If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.

**AND/OR**

If any additional fee for claims is required, charge Deposit Account No. 01-2384.

7.  Other:



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